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February 14, 2006

From: Curtis A. Vock

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Number of Pages Transmitted (including this cover sheet): 3

Message:

Application Number

10/749,545

Filing Date

December 31, 2003

First Named Inventor

Matthew Jay

Art Unit

3611

Examiner Name

Brian Green

Attorney Docket Number

440334

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FAX NO. 7209313001 **FEB 1 4 2006**

P. 02

PTO/SB/21 (09-04)

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| TRANSMITTAL | | Application Number | er | 10/749,54 | 5 | | | |
| FORM | Filing Date | | December | December 31, 2003 | | | | |
| PORIVI | | First Named Inventor | | Matthew Jay | | | | |
| | | Art Unit | | 3611 | | | | |
| | | Examiner Name | | Brian Gree | an · | | | |
| Total Number of Pages in This Submis | | Attorney Docket N | umber | 440334 | ······································ | | | |
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| Firm | LATHROP & G | AGE LC | | | | | | |
| Signature | Signature (mAA. Vel) | | | | | | | |
| Printed Name | Curtis A. Vack | | | | | | | |
| Date | February 14, 20 | 30 | Reg. No. | 38,356 | | | | |
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P. 03

PTC/S3881 (04-05)
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Updar the Pawaywork Reduction Act of 1895, no persons are required to respond to a collection of information unless it displace a void OMB control number. 10/749,545 **Application Number POWER OF ATTORNEY** December 31, 2003 **Filing Date** Matthew Jay First Named Inventor and Media Display System For Ski-Lift **CORRESPONDENCE ADDRESS** Chair 3811 **Art Unit** INDICATION FORM Brian Green Examiner Namo Attorney Docket Number 440334

| I hereby revoke all previous powers of attorney given in the above-identified application. | | | | | | | |
|---|---|--------------------------------|---------------------|--|--|--|--|
| I hereby appoint: | | | | | | | |
| ☑ Practitioners as OR | sociated with the Gustomer Number: | 30955 | | | | | |
| Practitioner(s) n | arned below: | | | | | | |
| | Name | Registration N | Registration Number | | | | |
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| i am the: | | | | | | | |
| Applicant/Inventor. | | | | | | | |
| Assignee of record of the entire interest. See 37 CFR 3.71. | | | | | | | |
| Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98) | | | | | | | |
| SIGNATURE of Applicant or Assignee of Record | | | | | | | |
| 'Signature | *** | Date | 2114/06 | | | | |
| Name | Matthew Jay | Telephone G | 30-420-4656 | | | | |
| Title and Company | Applicant/Inventor | | | | | | |
| NOTE: Signatures of all the inventors of assignees of second of the entire interest of their representative(s) are required. Submit multiple forms if | | | | | | | |
| | more than one signature is required, see below. Total of 1 forms are submitted. | | | | | | |

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